



## PROVIDER NOTICE

### **FHP Pharmacy Benefits Now Covered Under Medicaid**

Effective **October 1, 2008**, Health Plus members participating in Family Health Plus (FHP) will receive their pharmacy benefits through the Medicaid fee-for-service program. These members will be issued a Medicaid Benefit Identification Card to obtain their pharmacy benefit.

Family Health Plus members who are already using a Medicaid Benefit Identification Card to obtain other benefits can begin using that same card to access their pharmacy benefits on or after **October 1, 2008**. Prior to this date, members should continue accessing their pharmacy benefits with their Health Plus identification card.

#### **The pharmacy benefit includes:**

- Prescription drugs
- Insulin and diabetic supplies currently covered as a pharmacy benefit by Medicaid (e.g., insulin syringes, blood glucose test strips, lancets, alcohol swabs)
- Smoking cessation agents, including OTC products
- Select over-the-counter medications covered on the Medicaid Preferred Drug List (Prilosec OTC, loratadine, Zyrtec)
- Hearing aid batteries
- Enteral formulae with prior authorization (1-866-211-1736)

Drug co-payments for Family Health Plus members will not change. Co-payments will remain at \$6.00 for brand-name drugs, \$3.00 for generic drugs, \$1.00 for diabetic supplies, hearing aid batteries and enteral formulae, and \$0.50 for covered over-the-counter drugs.

For more information about Family Health Plus co-payments, please refer to the [April 2006 Medicaid Update](#), "Family Health Plus Co-payment Information."

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Prescriptions for Family Health Plus members will be subject to all Medicaid program requirements. Prescriptions may also be subject to prior authorization under Medicaid's Preferred Drug Program, Clinical Drug Review Program, and the Mandatory Generic Drug Program. Prior authorization is obtained through the Clinical Call Center at 1-877-309-9493.

For more information see:

<https://newyork.fhsc.com>, or

[http://www.nyhealth.gov/health\\_care/medicaid/program/pharmacy.htm](http://www.nyhealth.gov/health_care/medicaid/program/pharmacy.htm)

With the exception of controlled substances, prescriptions must be filled **within 60 days** and are valid for six months from the original prescription date with up to five refills.

Drugs administered in the physician's office (J-Code drugs) remain in the FHP managed care benefit package and should continue to be billed to Health Plus.